

QUARTERLY STATEMENT

AS OF September 30, 2007 OF THE CONDITION AND AFFAIRS OF THE

Health Plan of Michigan, Inc.

Organized under the Laws of Michigan United States of America Licensed as business type: Life, Accident & Health [] Property/Casualled 7 (red.) Months Health Maintenance Organization/X Debtal Service Corporation Other [] Property/Casualled 7 (red.) Months Maintenance Organization/X Incorporated/Organized 123/1995 State of Debtal Service Corporation Other [] Corporation	NAIC Group Code	0000 (Current Period)	, 0000 (Prior Perior		Company Code	52563	Employer's ID Number	38-3253977
Licensed as business type: Urfs, Acodemt & Health (I and Service Corporation) Valor Service Corporation) Valor Service Corporation) Valor Service Corporation) Valor Service Corporation Valor Service Valor Valor Valor Valor Valor Valor Valor Valor Valor Valo	Organized under the Laws	of	Michigan	·	State of Domi	cile or Port of Entry	/ Mic	higan
Debug Policy Comparison Valid Service Corporation Health Maintenance Organization (X)	Country of Domicile		United States of Americ	ca				
Statutory Home Office 17515 W. Nine Mille Road, Suite 500 Southfield, MI 49075 (Street and Number) (City, or Town, State and Zp Code) Main Administrative Office (City, or Town, State and Zp Code) Southfield, MI 49075 (Street and Number) (City, or Town, State and Zp Code) Main Address (City, or Town, State and Zp Code) (Street and Number) (City, or Town, State and Zp Code) Mail Address (Street and Number of P.O. Bod) (City, or Town, State and Zp Code) Mail Address (Street and Number of P.O. Bod) (City, or Town, State and Zp Code) Some (Stood and Number of P.O. Bod) (City, or Town, State and Zp Code) Some (Stood and Number of P.O. Bod) (City, or Town, State and Zp Code) Informative Website Address Statutory Statement Context (State and Number of P.O. Bod) (Pees Code) (Telephone Number) Jon B. Cotton (City, or Town, State and Zp Code) (Pees Number) Jon B. Cotton (City, or Town, State and Zp Code) (Pees Number) Jon B. Cotton (City, or Town, State and Zp Code) (Pees Number) Jon B. Cotton (City, or Town, State and Zp Code) (Pees Number) Jon B. Cotton (City, or Town, State and Zp Code) (Pees Number) Jon B. Cotton (City, or Town, State and Zp Code) (Pees Number) Jon B. Cotton (City, or Town, State and Zp Code) (Pees Number) Jon B. Cotton (City, or Town, State and Zp Code) (Pees Number) Jon B. Cotton N.D. Peesident/CIO Jon B.	Licensed as business type:	Dental Service C		Vision Service Corp	oration[]	Health N		emnity[]
Main Administrative Office (Street and Number) (City, or Town, State and Zip Code) Southfield, MI 48975 (Street and Number) (Cety or Town, State and Zip Code) Mail Address (T7515 W. Nine Mile Road, Suite 500 (Street and Number) (Cety, or Town, State and Zip Code) Primary Location of Books and Records Same (Street and Number or P.O. Box) (City, or Town, State and Zip Code) Same (Street and Number or P.O. Box) (City, or Town, State and Zip Code) Same (Street and Number or P.O. Box) (City, or Town, State and Zip Code) Internet Website Address Statutory Statement Contact Jon B. Cotton (Name) (Area Code) (Telephone Number) (Fast Number) (Cety, or Town, State and Zip Code) (Fast Number) (Fast Number) (Fast Number) (Fast Number) (Fast Number) (Fast Number) (Code) (Telephone Number) (Fast Number) (Code) (Telephone Number) (Code) (Te	Incorporated/Organized		12/31/1995		Comme	enced Business	12/31/1995	5
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Southfield, MI 48075 (248)557-3700 (248)	,				, , , , , ,	ila Poad Suita 500	(City, or Town, State and Zip Code)
Mail Address Cloy or Town, State and Zip Code) Southfield, Mil 4075 Southfield, Mil 4076 Southfield, Mil 4	Wall Administrative Office							
Mail Address 1755 W Nine Mile Road, Suite 500 Southfield, Mil 49075 Sout							· ,	har
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Internet Website Address			Sama		(Si	treet and Number)	(248)557-3700	
Statutory Statement Contact Southfield, MI 48075 Carlos Car		(City, or T	,				\ /	ber)
Control Cont	Internet Website Address		www.hpm	ich.com			, ,, ,	,
Control Cont	Statutory Statement Contac	×+	lon P. C	Cotton			(248)204 6011	
Folicyowner Relations Contact Carlair Address Carla Industrial Indu	Statutory Statement Contac						\ /	extension)
Policyowner Relations Contact Southfield, MI 48075 Steet and Number) (248)557-3700		jcot	ton@hpmich.com `	,				,
Southfield, MI 48075 (City, or Town, State and Zp Code) OFFICERS Name Title David B. Cotton M.D. President/CEO Thomas Lauzon Janice Torosian Tressurer/CFO OTHERS DIRECTORS OR TRUSTEES George Ellis Thomas Lauzon Serelary/CiO Janice Torosian Tressurer/CFO OTHERS DIRECTORS OR TRUSTEES Kimberly Harper # State of Oakland Ss State of Oakland Ss State of Michigan County of Oakland Ss The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated at the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs asid reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAI Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ, or, (2) that state rules or regulations require differences exporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestate described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement. (Signature) David B. Cotton, M.D. (Frinted Name) (Printed	Dell's an and Delet's an Octob		(E-Mail Address)		47545 W. N	r. Mr. D. d. O.	,	
Southfield, MI 48075 (City, or Town. State and Zip Code) OFFICERS Name Title David B, Cotton M.D. President County of Thomas Lauzon Service and Se	Policyowner Relations Con	act					TE 500	
OFFICERS Name		Sou	thfield, MI 48075		(2)		(248)557-3700	
Name Title David B. Cotton M.D. President/CEO Thomas Lauzon Soretary/CIO Janice Torosian Treasurer/CFO OTHERS DIRECTORS OR TRUSTEES Ceorge Ellis Thomas Lauzon State of County of Oakland Ss The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated at the herein described assets were the absolute property of the said reporting entity, for any liens or claims thereon, except as herein stated, and that this statement, with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs and reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAI Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences perioring port estated to accounting practices and procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences perioring port estated to accounting practices and procedures, according to the best of their information, knowledge and feet, respectively. Furthermore, the scope of this attestant described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.		(City, or T	own, State and Zip Code)				(Area Code) (Telephone Number)(E	xtension)
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Thomas Lauzon County of Qakland ss				DIRECTORS (OR TRUST	_		
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David B. Cotton, M.D. Thomas Lauzon Janice Torosian (Printed Name) (Printed Name) (Printed Name) 1. 2. 3. President Secretary Treasurer (Title) (Title) (Title) Subscribed and sworn to before me this a. Is this an original filing? Yes[X] No[]	County of Ori The officers of this reporting the herein described assets with related exhibits, schedu said reporting entity as of the Statement Instructions and Areporting not related to accodescribed officers also include	entity, being duly sw were the absolute prices and explanations e reporting period states accounting Practices unting practices and des the related corre	operty of the said report therein contained, annot ted above, and of its ind and Procedures manua procedures, according the sponding electronic filing	ting entity, free and cle exed or referred to, is a come and deductions t al except to the extent to to the best of their inforg with the NAIC, when	ar from any liens on a full and true stater herefrom for the pe that: (1) state law m rmation, knowledge required, that is an	r claims thereon, ex ment of all the asseriod ended, and ha hay differ; or, (2) that and belief, respective exact copy (excep	xcept as herein stated, and that thets and liabilities and of the conditive been completed in accordance at state rules or regulations requirtively. Furthermore, the scope of	nis statement, together ion and affairs of the with the NAIC Annual re differences in this attestation by the
day of , 2007 b. If no, 1. State the amendment number	(1	B. Cotton, M.D. Printed Name) 1. President (Title)	, 2007	Thoma (Printe Sec (1) a. Is this an original b. If no, 1. Stat	s Lauzon d Name) 2. retary filling? e the amendment n	umber -	Janice Torosian (Printed Name) 3. Treasurer (Title)	

(Notary Public Signature)

ASSETS

	AUU		1	4	
			urrent Statement Da		4
		1	2	3	
				Net Admitted	December 31,
			Nonadmitted	Assets	Prior Year Net
		Assets	Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	13,982,028		13,982,028	12,174,072
2.	Stocks:				
	2.1 Preferred stocks	620 754		620 75/	620 343
				,	
	2.2 Common stocks				
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
1.	Real estate:				
+.					
	4.1 Properties occupied by the company (less \$0				
	encumbrances)				
	4.2 Properties held for the production of income (less \$0				
	encumbrances)				
	<i>'</i>	I			
	4.3 Properties held for sale (less \$ 0 encumbrances)				
).	Cash (\$32,853,930), cash equivalents (\$0) and short-term				
	investments (\$10,000,000)	42.853.930		42.853.930	32.380.435
S .	Contract loans (including \$0 premium notes)				
	, , ,	I			
7.	Other invested assets				l ' '
3.	Receivables for securities				
9.	Aggregate write-ins for invested assets				
10.	Subtotals, cash and invested assets (Lines 1 to 9)				
	·				
11.	Title plants less \$0 charged off (for Title insurers only)	I			
12.	Investment income due and accrued	156,237		156,237	117,165
3.	Premiums and considerations:				
	13.1 Uncollected premiums and agents' balances in the course of				
	•				
	collection				
	13.2 Deferred premiums, agents' balances and installments booked				
	but deferred and not yet due (including \$0 earned but				
	unbilled premiums)				
	· · · · · · · · · · · · · · · · · · ·				
	13.3 Accrued retrospective premiums				
4.	Reinsurance:				
	14.1 Amounts recoverable from reinsurers				
	14.2 Funds held by or deposited with reinsured companies				
	14.3 Other amounts receivable under reinsurance contracts				
5.	Amounts receivable relating to uninsured plans				
16.1	Current federal and foreign income tax recoverable and interest thereon				
16.2	Net deferred tax asset				(723 000)
17.					' ' '
	Guaranty funds receivable or on deposit				
18.	Electronic data processing equipment and software				
9.	Furniture and equipment, including health care delivery assets				
	(\$0)				
20.	Net adjustments in assets and liabilities due to foreign exchange rates				
	,				
21.	Receivables from parent, subsidiaries and affiliates				
22.	Health care (\$0) and other amounts receivable	448,436		448,436	991,935
23.	Aggregate write-ins for other than invested assets	863,469	849.917	13.552	13.552
24.	Total assets excluding Separate Accounts, Segregated Accounts and	,,,,,,			
.4.			0.40.04=		
	Protected Cell Accounts (Lines 10 to 23)	68,572,598	849,917	67,722,681	53,428,793
25.	From Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts				
26.	Total (Lines 24 and 25)				
	ILS OF WRITE-INS	00,072,000	040,017	07,722,001	1 00,420,700
	ILS OF WATE-INS				
901.					
)902.)903.					
	Summany of romaining write inc for Line 0 from everflow page				
1990.	Summary of remaining write-ins for Line 9 from overflow page				
1999.	TOTALS (Lines 0901 through 0903 plus 0998) (Line 9 above)	40.550		40.550	40.550
:301.	Deposits				
	Acquired Membership Value				
2302.		170 657	170 657		
2302. 2303.	Long Term Investment Fair Value Adjustment				
2302. 2303. 2398.	Long Term Investment Fair Value Adjustment Summary of remaining write-ins for Line 23 from overflow page TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)				

STATEMENT AS OF September 30, 2007 OF THE Health Plan of Michigan, Inc.

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIEO, OAI ITAL AND	Current Period			Prior Year	
		1 Covered	2	3 Total	4 Total	
1	Claims unpaid (less \$0 reinsurance ceded)	28 307 717	Uncovered	Total	Total	
1. 2.	Accrued medical incentive pool and bonus amounts					
3.	Unpaid claims adjustment expenses					
4.	Aggregate health policy reserves					
5.	Aggregate life policy reserves					
6.	Property/casualty unearned premium reserve					
7.	Aggregate health claim reserves					
8.	Premiums received in advance					
9.	General expenses due or accrued					
10.1	Current federal and foreign income tax payable and interest thereon (including	101,337		101,337	3,700,232	
10.1	\$0 on realized gains (losses))	270 502		270 502	500 000	
10.2	Net deferred tax liability					
11.	Ceded reinsurance premiums payable					
12.	Amounts withheld or retained for the account of others					
13.	Remittances and items not allocated					
14.	Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current)					
15	Amounts due to parent, subsidiaries and affiliates					
15.	Payable for securities					
16.	•					
17.	Funds held under reinsurance treaties with (\$0 authorized reinsurers and					
40	\$0 unauthorized reinsurers)					
18.	Reinsurance in unauthorized companies					
19.	Net adjustments in assets and liabilities due to foreign exchange rates					
20.	Liability for amounts held under uninsured plans					
21.	Aggregate write-ins for other liabilities (including \$0 current)					
22.	Total liabilities (Lines 1 to 21)					
23.	Aggregate write-ins for special surplus funds Common capital stock					
24.	·				·	
25.	Preferred capital stock					
26.	Gross paid in and contributed surplus			·	·	
27.	Surplus notes					
28.	Aggregate write-ins for other than special surplus funds					
29.	Unassigned funds (surplus)	X X X	X X X	35,935,642	30,147,459	
30.	Less treasury stock, at cost:	, , , , , , , , , , , , , , , , , , ,				
	30.1					
	30.2 shares preferred (value included in Line 25 \$					
31.	Total capital and surplus (Lines 23 to 29 minus Line 30)					
32. DETAI	Total Liabilities, capital and surplus (Lines 22 and 31)	•	X X X	67,722,681	53,428,793	
2101.						
2102. 2103.						
2198.	Summary of remaining write-ins for Line 21 from overflow page					
2199. 2301.	TOTALS (Lines 2101 through 2103 plus 2198) (Line 21 above)					
2302.		X X X	X X X			
2303. 2398.	Summary of remaining write-ins for Line 23 from overflow page					
2399.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)	X X X	X X X			
2801. 2802.						
2803.		X X X	X X X			
2898. 2899.	Summary of remaining write-ins for Line 28 from overflow page		X X X			
2009.	10 17 120 (Liniou 2001 timough 2000 plus 2000) (Linio 20 above)	٨٨٨	۸۸۸			

STATEMENT AS OF September 30, 2007 OF THE Health Plan of Michigan, Inc. STATEMENT OF REVENUE AND EXPENSES

	OTATEMENT OF INEVERSE AND			
		Current Ye	ear To Date	Prior Year To Date
		1	2	3
		Uncovered	Total	Total
1.	Member Months	X X X	1,151,361	940,786
2.	Net premium income (including \$0 non-health premium income)	X X X	237,746,905	157,007,640
3.	Change in unearned premium reserves and reserves for rate credits	X X X		
4.	Fee-for-service (net of \$0 medical expenses)	X X X		
5.	Risk revenue	x x x		
6.	Aggregate write-ins for other health care related revenues	x x x	(14,277,755)	(9,990,916)
7.	Aggregate write-ins for other non-health revenues	X X X		
8.	Total revenues (Lines 2 to 7)	x x x	223,469,150	147,016,724
Hospit	al and Medical:			
9.	Hospital/medical benefits		149,662,505	81,504,062
10.	Other professional services		1,030,049	1,019,617
11.	Outside referrals		10,026,063	9,880,013
12.	Emergency room and out-of-area		5,180,088	4,790,229
13.	Prescription drugs			
14.	Aggregate write-ins for other hospital and medical			
15.	Incentive pool, withhold adjustments and bonus amounts			
16.	Subtotal (Lines 9 to 15)			
Less:	Cubicidi (Ellics 5 to 10)		200,002,000	124,000,222
17.	Net reinsurance recoveries		10/ 087	137 333
18.	Total hospital and medical (Lines 16 minus 17)			
19.				
	Non-health claims (net)			
20.	Claims adjustment expenses, including \$0 cost containment expenses			
21.	General administrative expenses		18,016,700	12,152,983
22.	Increase in reserves for life and accident and health contracts (including \$0 increase			
	in reserves for life only)			
23.	Total underwriting deductions (Lines 18 through 22)			
24.	Net underwriting gain or (loss) (Lines 8 minus 23)			
25.	Net investment income earned			
26.	Net realized capital gains (losses) less capital gains tax of \$0			
27.	Net investment gains or (losses) (Lines 25 plus 26)		1,604,428	1,576,015
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered			
	\$0) (amount charged off \$0)]			
29.	Aggregate write-ins for other income or expenses		6	6
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24			
	plus 27 plus 28 plus 29)	X X X	5,772,866	10,954,058
31.	Federal and foreign income taxes incurred	X X X	2,020,502	3,823,946
32.	Net income (loss) (Lines 30 minus 31)	X X X	3,752,364	7,130,112
DETAI 0601.	LS OF WRITE-INS Quatlity Assessment Assurance Fee		(14 277 755)	(0.065.060)
0602.	MI Primary Care Assoc Assessment			
0603.				
0698. 0699.	Summary of remaining write-ins for Line 6 from overflow page TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)	X X X	(14.277.755)	(9.990.916)
0701.		X X X		
0702. 0703.				
0798.	Summary of remaining write-ins for Line 7 from overflow page			
0799.	TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)	X X X		
1401. 1402.	Devices - Hearing and Speech		89,590	82,649
1403.				
1498. 1499.	Summary of remaining write-ins for Line 14 from overflow page			
2901.	Miscellaneous Income			· · · · · · · · · · · · · · · · · · ·
2902.	Rental Income			
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page			
2999.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)		6	6

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year	3
		To Date	To Date	Prior Year
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	30,443,521	30,080,385	30,080,384
34.	Net income or (loss) from Line 32	3,752,364	7,130,112	11,997,772
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$	2,154,091	749,227	883,679
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			(359,000)
39.	Change in nonadmitted assets	(83,271)	495,267	625,000
40.	Change in unauthorized reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in			
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in			
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			(11,250,000)
47.	Aggregate write-ins for gains or (losses) in surplus	(35,000)	(1,534,314)	(1,534,314)
48.	Net change in capital and surplus (Lines 34 to 47)	5,788,184	6,840,292	363,137
49.	Capital and surplus end of reporting period (Line 33 plus 48)	36,231,705	36,920,677	30,443,521
DETAI 4701.	LS OF WRITE-INS Property Dividend to Stockholders	(35,000)	(1,534,314)	(1,534,314)
4702.	0			
4703. 4798. 4799.	0			

CASH FLOW

To Date December 3		OAGIII LOW	1 Current Year	2 Prior Year Ended
Premiums collected net of reinsurance				December 31
Net investment income		Cash from Operations		
Miscallaneous income 225.014.222 207.187. Total (Lines 1 to 3) 225.014.222 207.187. Sendit and loss raided payments 188.380,050 170.226. Net transfers to Separate Accounts. Segregated Accounts and Protected Cell Accounts 22.708.459 18.983. Dividends paid to policyholders 22.708.459 18.983. Proderal and foreign income texas paid (recovered) net of \$	1.	Premiums collected net of reinsurance	223,469,150	204,725,815
Total (Lines 1 to 3)	2.	Net investment income	1,545,072	2,461,342
Benefit and loss related payments 188,580,050 170,2296 Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts 22,708,459 16,983, Dividents paid to policy/inders 22,708,459 16,983, Dividents paid to policy/inders 22,500,000 62,15. Total (Lines 6 through 9) 213,538,609 193,406, Total (Lines 5 through 9) 213,538,609 193,406, Net cash from operations (Line 4 minus Line 10) 11,475,713 13,7763 Proceeds from investments soid, matured or repaid 12,1 Bonds 939,814 2,263, 12,1 Bonds 939,814 2,263, 12,2 Slocks 170,736 94, 13,3 Mortgage loans 12,4 Real estate 12,5 Other invested assets 90,0 12,5 Net gains or (losses) on cash, cash equivalents and short-term investments 387,466 125,727 1,488,016 2,282, 12,5 Other invested displaced (Lines 12,1 to 12,7) 1,488,016 2,282, 13,3 Bonds 2,799,762 5,754, 13,3 Bonds 2,799,762 5,754, 13,4 Real estate 15,5 Other invested displaced (Lines 13,1 to 13,6) 2,925,489 6,053, 13,5 Other invested assets 13,5 Other invested assets 13,5 Other invested assets 13,5 Other invested displaced (Lines 13,1 to 13,6) 2,925,489 6,053, 13,4 Real estate 15,5 Other invested assets 13,5 Other invested assets 13,6 Microlaneous applications 13,	3.	Miscellaneous income		
Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts 22,708,459 16,983,	4.	Total (Lines 1 to 3)	225,014,222	207,187,157
Commissions, expenses paid and aggregate write-ins for deductions 22,768,459 16,983;	5.	Benefit and loss related payments	188,580,050	170,229,037
Dividends paid to policyholders Federal and foreign income taxes paid (ecovered) net of S	ô.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
Federal and foreign income taxes paid (recovered) net of \$	7.	Commissions, expenses paid and aggregate write-ins for deductions	22,708,459	16,963,719
Total (Lines 5 through 9)	3.	Dividends paid to policyholders		
Net cash from operations (Line 4 minus Line 10)	9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	2,250,000	6,215,44
Cash from Investments	10.	Total (Lines 5 through 9)	213,538,509	193,408,20
Proceeds from investments sold, matured or repaid: 12.1	11.	Net cash from operations (Line 4 minus Line 10)	11,475,713	13,778,950
12.1 Bonds		Cash from Investments		
12.2 Stocks	12.	Proceeds from investments sold, matured or repaid:		
12.2 Stocks			939,814	2,263,68
12.3 Mortgage loans				
12.4 Real estate				
12.5 Other invested assets 90,0 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments 337,466 12.7 Miscellaneous proceeds 3367,466 12.8 Total investment proceeds (Lines 12.1 to 12.7) 1,499,016 2,362,6 12.8 Total investments acquired (long-term only): 1,499,016 2,362,6 13.1 Bonds 2,799,762 5,754,6 13.2 Stocks 125,727 180,0 13.3 Mortgage loans 125,727 180,0 13.3 Mortgage loans 15,400,00 13.4 Real estate 15,500,00 13.5 Other invested assets 103,1 13.6 Miscellaneous applications 13,7 Total investments acquired (Lines 13.1 to 13.6) 2,925,489 6,053,6 Net cash from investments acquired (Lines 13.1 to 13.6) 2,925,489 6,053,6 Net cash from investments (Line 12.8 minus Lines 13.7 and 14) (1,427,473) (3,690,9 Cash from Financing and Miscellaneous Sources 16.2 Capital and paid in surplus, less treasury stock 16.3 Borrowed funds 16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 11,250,0 16.6 Other cash provided (applied) 425,255 166,2 Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) 425,255 166,2 Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 10,473,495 (995,7 Cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 42,853,930 32,380,435 33,376,192 End of period (Line 18 plus Line 19.1) 42,853,930 32,380,435 33,376,192 End of period (Line 18 plus Line 19.1) 42,853,930 32,380,435 33,376,192 End of period (Line 18 plus Line 19.1) 42,853,930 32,380,485 33,376,192 End of period (Line 18 plus Line 19.1) 42,850,930 32,380,485 33,376,192 End of period (Line 18 plus Line 19.1) 42,850,930 32,380,485 33,376,193 32,380,485 33,376,193 32,380,485 33,376,193 32,380,485 33,376,193 32,380,485				
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments 12.7 Miscellaneous proceeds 387,466 12.8 Total investment proceeds (Lines 12.1 to 12.7) 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,362,61 1,498,016 2,799,762 5,754,61 1,32 1,502,727 1,80,713,13 1,32 1,33 Mortgage loans 1,34 Real estate 1,54 1,35 1,35 1,36 1				
12.7 Miscellaneous proceeds 387,466 12.8 Total investment proceeds (Lines 12.1 to 12.7) 1,498,016 2,362,61 12.8 Total investments acquired (long-term only): 13.1 Bonds 2,799,762 5,754,61 13.2 Stocks 125,727 180,113.3 Mortgage loans 125,727 180,113.3 Mortgage loans 125,727 180,113.4 Real estate 15,413.5 Other invested assets 15,413.5 Other invested assets 103,61 13.6 Miscellaneous applications 13.7 Total investments acquired (Lines 13.1 to 13.6) 2,925,489 6,053,61 13.7 Total investments acquired (Lines 13.1 to 13.6) 2,925,489 6,053,61 13.7 Total investments (Line 12.8 minus Lines 13.7 and 14) (1,427,473) (3,690,9) Cash from Financing and Miscellaneous Sources 16.1 Surplus notes, capital notes 16.2 Capital and paid in surplus, less treasury stock 16.3 Borrowed funds 16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 11,250,1 16.6 Other cash provided (applied) 425,255 166,2 11,250,1 16.6 Other cash provided (applied) 425,255 166,2 11,250,1 16.7 Cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 10,473,495 (995,7 19.2 End of period (Line 18 plus Line 19.1) 42,853,930 32,380,435 33,376,19.2 End of period (Line 18 plus Line 19.1) Amount				· ·
12.8 Total investment proceeds (Lines 12.1 to 12.7) 1,498,016 2,362,6				
Cost of investments acquired (long-term only): 13.1 Bonds		·		
13.1 Bonds	3.		1,400,010	2,002,00
13.2 Stocks	0.		2 700 762	5 75/ 61
13.3 Mortgage loans 13.4 Real estate				
13.4 Real estate				
13.5 Other invested assets		5 5		
13.6 Miscellaneous applications 13.7 Total investments acquired (Lines 13.1 to 13.6)				
13.7 Total investments acquired (Lines 13.1 to 13.6) 2,925,489 6,053,6 Net increase (or decrease) in contract loans and premium notes Net cash from investments (Line 12.8 minus Lines 13.7 and 14) (1,427,473) (3,690,9) Cash provided (applied): 16.1 Surplus notes, capital notes 16.2 Capital and paid in surplus, less treasury stock 16.3 Borrowed funds 16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 16.6 Other cash provided (applied) 425,255 166,2 Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) 425,255 (166,2) RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 10,473,495 (995,7) Cash, cash equivalents and short-term investments: 19.1 Beginning of year 32,380,435 33,376; 19.2 End of period (Line 18 plus Line 19.1) 42,853,930 32,380,4 Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount				
Net cash from investments (Line 12.8 minus Lines 13.7 and 14)				
Cash from investments (Line 12.8 minus Lines 13.7 and 14)	4	, , ,		
Cash from Financing and Miscellaneous Sources Cash provided (applied): 16.1 Surplus notes, capital notes 16.2 Capital and paid in surplus, less treasury stock 16.3 Borrowed funds 16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 16.6 Other cash provided (applied) Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) Cash, cash equivalents and short-term investments: 19.1 Beginning of year 32,380,435 33,376, 19.2 End of period (Line 18 plus Line 19.1) Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount	4.			
Cash provided (applied): 16.1 Surplus notes, capital notes 16.2 Capital and paid in surplus, less treasury stock 16.3 Borrowed funds 16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 16.6 Other cash provided (applied) Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) Cash, cash equivalents and short-term investments: 19.1 Beginning of year 32,380,435 33,376, 19.2 End of period (Line 18 plus Line 19.1) Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount	5.		[(1,427,473)	(3,090,97)
16.1 Surplus notes, capital notes 16.2 Capital and paid in surplus, less treasury stock 16.3 Borrowed funds 16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 16.6 Other cash provided (applied) 17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 19. Cash, cash equivalents and short-term investments: 19.1 Beginning of year 10. Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:	^	•		
16.2 Capital and paid in surplus, less treasury stock 16.3 Borrowed funds 16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 16.6 Other cash provided (applied) 17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 19. Cash, cash equivalents and short-term investments: 19.1 Beginning of year 10. Cash, cash equivalents and short-term investments: 19.2 End of period (Line 18 plus Line 19.1) 19.3 Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount	6.			
16.3 Borrowed funds 16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 16.6 Other cash provided (applied) 17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) 18. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) 19. RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS 19. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 19. Cash, cash equivalents and short-term investments: 19.1 Beginning of year 19.2 End of period (Line 18 plus Line 19.1) 20. Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount		and the second self-record		
16.4 Net deposits on deposit-type contracts and other insurance liabilities 16.5 Dividends to stockholders 16.6 Other cash provided (applied) Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) Cash, cash equivalents and short-term investments: 19.1 Beginning of year 19.2 End of period (Line 18 plus Line 19.1) Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount				
16.5 Dividends to stockholders				
16.6 Other cash provided (applied) 425,255 166,2 Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) 425,255 (11,083,7) RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 10,473,495 (995,7) Cash, cash equivalents and short-term investments: 19.1 Beginning of year 32,380,435 33,376,7 19.2 End of period (Line 18 plus Line 19.1) 42,853,930 32,380,4 Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount				
Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)				
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS 3. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	_			
Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	7.		425,255	1 (11,083,715
Cash, cash equivalents and short-term investments: 19.1 Beginning of year	•		46.4== ::	
19.1 Beginning of year 32,380,435 33,376,7 19.2 End of period (Line 18 plus Line 19.1) 42,853,930 32,380,4 Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount	8.	•	10,473,495	(995,736
19.2 End of period (Line 18 plus Line 19.1)	9.			
Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions: Amount Amount				
Amount Amount				32,380,43
		Guppienientai Disclosures di Casii Fidw illionillation for Non-Casii Transactions:		Amount
		Description	1	2

			I
		Amount	Amount
	Description	1	2
20.0001			

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

		1	Comprehensive (I	Hospital & Medical)	4	5	6	7	8	9	10
		Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total I	Members at end of:										
1.	Prior Year	119,149								119,149	
2.	First Quarter	125,602								125,602	
3.	Second Quarter	129,334								129,334	
4.	Third Quarter	130,550								130,550	
5.	Current Year										
6.	Current Year Member Months									1,151,361	
Total I	Member Ambulatory Encounters for Period:										
7.	Physician	1,007,450								1,007,450	
8.	Non-Physician	795,293								795,293	
9.	Total	1,802,743								1,802,743	
10.	Hospital Patient Days Incurred	29,579								29,579	
11.	Number of Inpatient Admissions	8,485								8,485	
12.	Health Premiums Written (a)	238,250,049								238,250,049	
13.	Life Premiums Direct										
14.	Property/Casualty Premiums Written										
15.	Health Premiums Earned	237,746,905								237,746,905	
16.	Property/Casualty Premiums Earned										
17.	Amount Paid for Provision of Health Care Services	188,580,049								188,580,049	
18.	Amount Incurred for Provision of Health Care										
	Services									200,382,835	

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.............0.

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 days	Over 120 Days	Total
Individually Listed Claims Unpaid						
RX America - Pharmacy	2,195,888					2,195,8
0199999 Individually Listed Claims Unpaid	2,195,888					2,195,8
0299999 Aggregate Accounts Not Individually Listed - Uncovered						
0399999 Aggregate Accounts Not Individually Listed - Covered	3,214,557	532,509	451,661	203,519	1,197,984	5,600,
0499999 Subtotals	5,410,445	532,509	451,661	203,519	1,197,984	7,796,1
0599999 Unreported claims and other claim reserves						20,501,0
0699999 Total Amounts Withheld						
0799999 Total Claims Unpaid						28,29
0899999 Accrued Medical Incentive Pool And Bonus Amounts						1,500

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

						5	6
				Liat	oility		
		Cla	ims	End	d of		
		Paid Yea	r to Date	Current	Quarter		
		1	2	3	4		Estimated Claim
							Reserve and
		On	On	On	On		Claim
	Line	Claims Incurred	Claims Incurred	Claims Unpaid	Claims Incurred	Claims Incurred	Liability
	of	Prior to January 1	During the	Dec.31 of	During the	in Prior Years	Dec.31 of
	Business	of Current Year	Year	Prior Year	Year	(Columns 1+3)	Prior Year
1.	Comprehensive (hospital & medical)						
2.	Medicare Supplement						
3.	Dental only						
4.	Vision only						
5.	Federal Employees Health Benefits Plan						
6.	Title XVIII - Medicare						
7.	Title XIX - Medicaid						
8.	Other health						
9.	Health subtotal (Lines 1 to 8)						
10.	Healthcare receivables (a)		448,436				
11.	Other non-health						
12.	Medical incentive pools and bonus amounts						
13.	Totals	18,655,433	169,924,616		29,897,717	18,655,433	18,289,018

⁽a) Excludes \$...... loans or advances to providers not yet expensed.

Notes to Financial Statement

There have been no material changes since the annual filing.

- Note 1 Summary of Significant Accounting Policies no change
- Note 2 Accounting Changes and Corrections of Errors this note is not applicable to the Company
- Note 3 Business Combinations and Goodwill this note is not applicable to the Company
- Note 4 Discontinued Operations this note is not applicable to the Company
- Note 5 Investments this note is not applicable to the Company
- Note 6 Joint Ventures, Partnerships and Limited Liability Companies no change
- Note 7 Investment Income this note is not applicable to the Company
- Note 8 Derivative Instruments this note is not applicable to the Company
- Note 9 Income Taxes no change
- Note 10 Information Concerning Parent, Subsidiaries and Affiliates no change
- Note 11 Debt no change
- Note 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences, and Other Postretirement Benefit Plans this note is not applicable to the Company
- Note 13 Capital and Surplus, Stockholders Dividend Restrictions, and Quasi Reorganizations no change
- Note 14 Contingencies no change
- Note 15 Leases no change
- Note 16 Information About Financial Instruments with Off-balance sheet Risk and Financial Instruments with Concentrations of Credit Risk this note is not applicable to the Company
- Note 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities this note is not applicable to the Company
- Note 18 Gain or Loss to the Reporting Entity from Uninsured A&H Plans and Uninsured Portion of Partially Insured Plans this note is not applicable to the Company
- Note 19 Direct Premium Written/Produced by Managing General Agents/Third PartyAdministrators this note is not applicable to the Company
- Note 20 September 11 Events this note is not applicable to the Company
- Note 21 Other Items no change
- Note 22 Events Subsequent this note is not applicable to the Company
- Note 23 Reinsurance no change
- Note 24 Retrospectively Rated Contracts and Contracts Subject to Redetermination this note is not applicable to the Company
- Note 25 Change in Incurred Claims and Claims Adjustment Expenses no change
- Note 26 Intercompany Pooling Arrangements this note is not applicable to the Company
- Note 27 Structured Settlements this note is not applicable to the Company
- Note 28 Health Care Receivables no change
- Note 29 Participating Policies this note is not applicable to the Company
- Note 30 Premium Deficiency Reserves this note is not applicable to the Company
- Note 31 Anticipated Salvage and Subrogation no change

GENERAL INTERROGATORIES (Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted) PART 1 - COMMON INTERROGATORIES GENERAL

	Domicile, as re	ng entity experience any mate quired by the Model Act? report been filed with the dom		ne filing of Disclo	sure of Material	Transactions wit	h the State of	,	Yes[] No[X] Yes[] No[] N/A[X]
	Has any chang reporting entity If yes, date of		of this statement in the cha	irter, by-laws, ar	ticles of incorpora	ation, or deed of	settlement of the)	Yes[] No[X]
3.	Have there bee	en any substantial changes in e the Schedule Y - Part 1 - org		ce the prior qua	rter end?				Yes[] No[X]
4.1 4.2	Has the reporti	ng entity been a party to a me the name of entity, NAIC Com t as a result of the merger or c	erger or consolidation during apany Code, and state of do	g the period cove omicile (use two	ered by this state letter state abbre	ment? eviation) for any	entity that has		Yes[] No[X]
		Na	1 ame of Entity		2 NAIC Company	Code	3 State of Domi	cile	
	attorney-in-fact If yes, attach a	•	here been any significant cl	hanges regardin	g the terms of the	ging general age e agreement or p	ent(s), rincipals involved	d?	Yes[] No[X] N/A[]
6.2	State the as of date should be State as of what the reporting e	at date the latest financial exa date that the latest financial e the date of the examined bala at date the latest financial exa ntity. This is the release date of	examination report became ance sheet and not the date mination report became ava	available from e the report was ailable to other s	ither the state of completed or release or the public states or the publ	eased. ic from either the	state of domicile	e or	12/31/2004
	date). By what depart State of Michig	tment or departments? gan Office of Financial and Ins	surance Services					• ·	10/03/2005
	Has this report or revoked by a If yes, give full	ing entity had any Certificates any governmental entity during information	of Authority, licenses or reg the reporting period?	gistrations (inclu	ding corporate re	egistration, if app	licable) suspend	ed	Yes[] No[X]
 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator. 						Yes[] No[X] Yes[] No[X]			
		1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC	
				. Yes[] No[X]	. Yes[] No[X]	. Yes[] No[X]	. Yes[] No[X]	. Yes[] No	[X]
9.11 9.2	similar function (a) Honest ar relationsh (b) Full, fair, a (c) Compliana (d) The promy (e) Accountal If the responses Has the code	officers (principal executive of its) of the reporting entity subject dethical conduct, including the price with applicable government of internal reporting of violation bility for adherence to the code to 9.1 is No, please explaint of ethics for senior managers to 9.2 is Yes, provide inform	ect to a code of ethics, which to a code of ethical handling of actual andable disclosure in the period laws, rules and regulation as to an appropriate persone. E	th includes the for apparent cor iodic reports req ns; or persons ider	counting officer of oblowing standard officts of interest buried to be filed by	ls? Detween persona Doy the reporting of	al and profession		Yes[X] No[] Yes[] No[X]
9.3	Have any pro	visions of the code of ethics be to 9.3 is Yes, provide the na	een waived for any of the s	specified officers	?				Yes[] No[X]
10.1 10.2	Does the repo	orting entity report any amount e any amounts receivable fron	ts due from parent, subsidia n parent included in the Pa	aries or affiliates ge 2 amount:	on Page 2 of this	s statement?		\$	Yes[] No[X]
11.2 12.1	! If yes, explai Were any of t for use by and	en any change in the reporting n: he stocks, bonds, or other ass other person? (Exclude securi Il and complete information re	entity's own preferred or consets of the reporting entity loties under securities lending	oaned, placed ur		ement, or otherw	ise made availab	ıle	Yes[] No[X] Yes[] No[X]
		al estate and mortgages held i	•	Schedule BA:				\$.	(
14.	Amount of rea	al estate and mortgages held i	in short-term investments:					\$	
15.1 15.2	Does the repo	orting entity have any investme complete the following:	ents in parent, subsidiaries	and affiliates?					Yes[] No[X]

GENERAL INTERROGATORIES (Continued)

		1	2
		Prior Year-End	Current Quarter
		Book/Adjusted	Book/Adjusted
		Carrying Value	Carrying Value
15.21	Bonds		
15.22	Preferred Stock		
15.23	Common Stock		
15.24	Short-Term Investments		
15.25	Mortgages Loans on Real Estate		
15.26	All Other		
15.27	Total Investment in Parent, Subsidiaries and Affiliates		
	(Subtotal Lines 15.21 to 15.26)		
15.28	Total Investment in Parent included in Lines 15.21 to 15.26		
	above		

- 16.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?16.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

Yes[] No[X] Yes[] No[] N/A[X]

Yes[X] No[]

- Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1 - General, Section IV. H-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1	2
Name of Custodian(s)	Custodian Address
Northern Trust LaSalle Bank N.A.	50 South LaSalle Street Chicago IL 60675

17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1	2	3
Name(s)	Location(s)	Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?
17.4 If yes, give full and complete information relating thereto:

Yes[] No[X]

1	2	3	4
		Date	
Old Custodian	New Custodian	of Change	Reason

17.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1	2	3
Central Registration		
Depository	Name(s)	Address
123286 104751	Roble, Belko and Co.	5700 Corporate Drvie Pittsburgh PA 15237

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? 18.2 If no, list exceptions:

Yes[X] No[]

STATEMENT AS OF September 30, 2007 OF THE Health Plan of Michigan, Inc. SCHEDULE A - VERIFICATION Real Estate

		1	2
		'	Drian Vaar Endad
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Increase (decrease) by adjustment		
3.	Cost of acquired		
4.	Cost of additions to and permanent improvements		
5.	Total profit (loss) on sales		
6.	Increase (decrease) by foreign exchange adjustment		
7.	Amount received on sales		
8.	Book/adjusted carrying value at end of current period		
9.	Total valuation allowance		
10.	Subtotal (Lines 8 plus 9)		
11.	Total nonadmitted amounts		
12.	Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	mortgage Loans		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book value/recorded investment excluding accrued interest on mortgages owned, December 31 of prior year .		
2.	Amount loaned during period:		
	2.1 Actual cost at time of acquisitions		
	Actual cost at time of acquisitions Additional investment made after acquisitions		
3.	Accrual of discount and mortgage interest points and commitment fees		
4.	Increase (decrease) by adjustment		
5.	Total profit (loss) on sale		
6.	Amounts paid on account or in full during the period		
7.	Amounts paid on account or in full during the period		
8.	Increase (decrease) by foreign exchange adjustment		
9.	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period		
10.	Total valuation allowance		
11.	Subtotal (Lines 9 plus 10)		
12.	Total nonadmitted amounts		
13.	Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column)		

SCHEDULE BA - VERIFICATION

Other Invested Assets

		1	2
			Prior Year Ended
	Description	Year To Date	December 31
1.	Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	7,854,291	6,564,786
2.	Cost of acquisitions during period:		
	2.1 Actual cost at time of acquisitions		53,521
	2.2 Additional investment made after acquisitions		50,000
3.	Accrual of discount		
4.	Increase (decrease) by adjustment	1,784,453	1,275,984
5.	Total profit (loss) on sale		
6.	Amounts paid on account or in full during the period		90,000
7.	Amortization of premium		
8.	Increase (decrease) by foreign exchange adjustment		
9.	Book/adjusted carrying value of long-term invested assets at end of current period	9,638,744	7,854,291
10.	Total valuation allowance		
11.	Subtotal (Lines 9 plus 10)	9,638,744	7,854,291
12.	Total nonadmitted amounts		
13.	Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3)	9,638,744	7,854,291

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	12,794,415	9,527,550
2.	Cost of bonds and stocks acquired	2,925,462	5,934,746
3.	Accrual of discount	10,361	3,120
4.	Increase (decrease) by adjustment	(17,813)	
5.	Increase (decrease) by foreign exchange adjustment		
6.	Total profit (loss) on disposal	17,494	(39,093)
7.	Consideration for bonds and stocks disposed of	1,110,551	2,272,690
8.	Amortization of premium	7,586	359,218
9.	Book/adjusted carrying value, current period	14,611,782	12,794,415
10.	Total valuation allowance		
11.	Subtotal (Lines 9 plus 10)	14,611,782	12,794,415
12.	Total nonadmitted amounts		
13.	Statement value	14,611,782	12,794,415

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	During the Current Quarter for all bolius and Freiened Stock by Nating Class								
		1	2	3	4	5	6	7	8
		Book/Adjusted				Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
		Carrying Value	Acquisitions	Dispositions	Non-Trading	Carrying Value	Carrying Value	Carrying Value	Carrying Value
		Beginning of	During Current	During Current	Activity During	End of	End of	End of	December 31
		Current Quarter	Quarter	Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BOND	S								
1.	Class 1	22,487,071	768,486	523,103	365,038	20,856,152	22,487,071	23,097,492	21,185,301
2.	Class 2	233,352	46,469		(5,032)	58,380	233,352	274,789	
3.	Class 3		99,488		(34)			99,454	
4.	Class 4								
5.	Class 5								
6.	Class 6								
7.	Total Bonds	22,720,423	914,443	523,103	359,972	20,914,532	22,720,423	23,471,735	21,185,301
PREFE	ERRED STOCK								
8.	Class 1	570,402		94,614	101,051	449,564	570,402	576,839	556,453
9.	Class 2	66,525			(13,610)	66,525	66,525	52,915	63,890
10.	Class 3								
11.	Class 4								
12.	Class 5								
13.	Class 6								
14.	Total Preferred Stock	636,927		94,614	87,441	516,089	636,927	629,754	620,343
15.	Total Bonds & Preferred Stock	23,357,350	914,443	617,717	447,413	21,430,620	23,357,350	24,101,489	21,805,644

SCHEDULE DA - PART 1

Short - Term Investments Owned End of Current Quarter

	1	2	3	4	5
	Book/Adjusted				Paid for Accrued
	Carrying		Actual	Interest Collected	Interest
	Value	Par Value	Cost	Year To Date	Year To Date
8299999. Totals	10,000,000	X X X	10,000,000	299,841	

SCHEDULE DA - PART 2 - Verification

Short-Term Investments Owned

	Onort-Term investments Owned		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	10,000,000	10,000,000
2.	Cost of short-term investments acquired		
3.	Increase (decrease) by adjustment		
4.	Increase (decrease) by foreign exchange adjustment		
5.	Total profit (loss) on disposal of short-term investments		
6.	Consideration received on disposal of short-term investments		
7.	Book/adjusted carrying value, current period	10,000,000	10,000,000
8.	Total valuation allowance		
9.	Subtotals (Lines 7 plus 8)	10,000,000	10,000,000
10.	Total nonadmitted amounts		
11.	Statement value (Lines 9 minus 10)		
12.	Income collected during period	111,236	377,657
13.	Income earned during period		

15	Schedule DB Part F Section 1
16	Schedule DB Part F Section 2 NONE

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

Onlowing An New Nemogratice Treaties - Outrent Teal to Date										
1	2	3	4	5	6	7				
NAIC	Federal				Type of	Is Insurer				
Company	ID	Effective			Reinsurance	Authorized?				
Code	Number	Date	Name of Reinsurer	Location	Ceded	(Yes or No)				
Accident and Health - Non-aff	iliates									
67105	41-0451140		RELIASTAR LIFE INS CO	Minneapolis, Minnesota	SSL/A/I	Yes[X] No[]				

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

		Current	Tear to	Date - All	ocated by	States and				
						Direct Busi			_	1
		ls Insurer Licensed	2 Accident and	3	4	5 Federal Employees Health	6 Life and Annuity Premiums	7 Property/	8 Total	9
	State, Etc.	(Yes or No)	Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Benefits Program Premiums	and Other Considerations	Casualty Premiums	Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama (AL)	1								
2.	Alaska (AK)									
3.	Arizona (AZ)			1						
4.	Arkansas (AR)									
5.	California (CA)									
6.	Colorado (CO)									
7.	Connecticut (CT)								1	
8. 9.	Delaware (DE)									
10.	Florida (FL)	No								
11.	Georgia (GA)	No								
12.	Hawaii (HI)									
13.	Idaho (ID)									
14.	Illinois (IL)									
15.	Indiana (IN)									
16.	lowa (IA)								1	
17.	Kansas (KS)									
18.	Kentucky (KY)									
19.	Louisiana (LA)									
20.	Maine (ME)									
21.	Maryland (MD)	No								
22.	Massachusetts (MA)	No								
23.	Michigan (MI)							1		
24.	Minnesota (MN)									
25.	Mississippi (MS)									
26.	Missouri (MO)	No								
27.	Montana (MT)									
28.	Nebraska (NE)	No								
29.	Nevada (NV)	No								
30.	New Hampshire (NH)									
31.	New Jersey (NJ)									
32.	New Mexico (NM)									
33.	New York (NY)	No								
34.	North Carolina (NC)	No								
35.	North Dakota (ND)									
36.	Ohio (OH)									
37.	Oklahoma (OK)									
38.	Oregon (OR)									
39.	Pennsylvania (PA)									
40. 41.	Rhode Island (RI)									
	South Carolina (SC)								1	
42. 43.	Tennessee (TN)									
44.	Texas (TX)			1						
44. 45.	Utah (UT)									
46.	Vermont (VT)									
46. 47.	Virginia (VA)			1						
47.	Washington (WA)									
49.	West Virginia (WV)		l	1						
50.	Wisconsin (WI)								1	
51.	Wyoming (WY)									
52.	American Samoa (AS)								1	
53.	Guam (GU)									
54.	Puerto Rico (PR)									
55.	U.S. Virgin Islands (VI)			1						
56.	Northern Mariana Islands (MP)									
57.	Canada (CN)									
58.	Aggregate other alien (OT)									
59.	Subtotal									
60.	Reporting entity contributions for									
	Employee Benefit Plans								<u> </u>	
61.	Total (Direct Business)	(a). 1.			. 238,250,049				. 238,250,049	
DETAI	ILS OF WRITE-INS									
5801.		X X X .								
5802.		X X X .								
5803.		X X X .								
5898.	Summary of remaining write-ins for									
	Line 58 from overflow page	X X X .								
5899.	TOTALS (Lines 5801 through 5803									
1	plus 5898) (Line 58 above)	X X X .							1	

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

MEMBERS OF A HOLDING COMPANY GROUP **PART 1 - ORGANIZATIONAL CHART**

Caidan Enterprises, Inc. (Federal Employer Identification # 52-2422207)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at Sept. 30, 2007:

32.4% D. Cotton, M.D.

S. Cotton 31.6%

J. Cotton 10% - Non Voting Stock 10% - Non Voting Stock S. Cotton M. Cotton 10% - Non Voting Stock

T. Lauzon 6%

100%

Health Plan of Michigan, Inc. (MI; NAIC # 52563; Federal Employer Identification # 38-3253977)

Organization Governance and Ownership Structure: Equity Shareholders

Board of Directors

Shareholders at Sept. 30, 2007: Caidan Enterprises, Inc. 100%

Meridian Health Plan, Inc. (DE, Federal Employer Identification # 20-5822334)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at Sept. 30, 2007: Caidan Enterprises, Inc. 100%

Caidan Management Company, Inc. (MI, Federal Employer Identification # 36-4559356)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at Sept. 30, 2007: Caidan Enterprises, Inc. 100%

SCHEDULE Y - INFORMATION CONCERNING ACTI MEMBERS OF A HOLDING COMPANY GROUPART 1 - ORGANIZATIONAL CHART

Meridian Health Plan, Inc. (IL, Federal Employer Identification #20-3209671)

Organization Governance and Ownership Structure:

Equity Shareholders

Board of Directors

Shareholders at Sept. 30, 2007: Caidan Enterprises, Inc. 100%

Health Management, Inc. (common ownership with Health Plan of Michigan, Inc. majority stockholder)

(Federal Employer Identification # 38-3360283)

Shareholders at Sept. 30, 2007: D. Cotton, M.D. 100%

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

RESPONSE

No

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

Explanations:

Bar Codes:

Medicare Part D Coverage Supplement

OVERFLOW PAGE FOR WRITE-INS

ASSETS

	C	urrent Statement Da	te	4
	1	2	3	
			Net Admitted	December 31,
		Nonadmitted	Assets	Prior Year Net
	Assets	Assets	(Cols. 1 - 2)	Admitted Assets
2304. Pre-Paid Expenses				
2397. Summary of remaining write-ins for Line 23 (Lines 2304 through 2396)				

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year	3
		To Date	To Date	Prior Year
4704.	0			
4705.				
4706.	Repurchase of Stock			
4707.	0			
4708.	0			
4709.	0			
4710.	0			
4797.	Summary of remaining write-ins for Line 47 (Lines 4704 through 4796)			

E01	Schedule A Part 2NONE
E01	Schedule A Part 3NONE
E02	Schedule B Part 1NONE
E02	Schedule B Part 2NONE
E03	Schedule BA Part 1
E03	Schedule BA Part 2

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

	Citoti 7tii i	-ong ron	ii Boliao alia Otook	Acquired by the Company During the Current Quarter					
1	2	3	4	5	6	7	8	9	10
								Paid for	NAIC
								Accrued	Designation
CUSIP				Name of	Number of			Interest and	or Market
Identification	Description	Foreign	Date Acquired	Vendor	Shares of Stock	Actual Cost	Par Value	Dividends	Indicator (a)
		1 Oleigii	Date Acquired	Vendoi	Silates of Stock	Actual Cost	i ai vaiue	Dividends	indicator (a
Bonds - U.S. Govern	nments								
530718AF2	Liberty Media New Sr		09/21/2007	Various	X X X	99,488	90,000.00	308	3
0399999 Subtotal - B	onds - U.S. Governments				X X X	99,488	90,000.00	308	X X X
Bonds - Industrial a	nd Miscellaneous (Unaffiliated)								
02261WAB5	Alza Corp		09/05/2007	Various	x x x	64,286	75,000.00		1FE
143658AN2	Carnival Corp		08/03/2007	Morgan Stanley	X X X	11,665	10,000.00	63	1FE
46625MKK4	CMO JP Morgan		09/26/2007	Various	X X X	217,174	214,891.00		1Z
548661CG0	Lowes Cos		09/28/2007	Merrill Lynch	X X X	5,092	5,000.00		1FE
590188W46	Merrill Lynch		07/25/2007	Various	X X X	65,631	55,000.00		1FE
629568AL0	Nabors Industries		07/30/2007	Various	X X X	26,073	25,000.00		1FE
983024AD2	Wyeth		07/25/2007	JP Morgan		5,410	5,000.00		1FE
4599999 Subtotal - B	onds - Industrial and Miscellaneous (Unaffiliated)				X X X	395,331 .	389,891.00		X X X
6099997 Subtotal - B	onds - Part 3				X X X	494,819	479,891.00	381	X X X
6099998 Summary Ite	em for Bonds Bought and Sold This Quarter				X X X	X X X .	X X X	X X X	X X X
6099999 Subtotal - B					X X X	494,819	479,891.00	381	X X X
6599998 Summary Item for Preferred Stock Bought and Sold This Quarter						X X X	X X X	X X X	X X X
7299998 Summary Item for Common Stock Bought and Sold This Quarter						X X X	X X X	X X X	X X X
7399999 Subtotal - Preferred and Common Stocks X X X X X									X X X
7499999 Total - Bond	ls, Preferred and Common Stocks				X X X	494,819	X X X	381	X X X

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed, or Otherwise Disposed of

by the Company During the Current Quarter

								any Duni												
1 1	2	3	4 5	6	7	8	9	10		Change in Bo	ok/Adjusted Ca	arrying Value		16	17	18	19	20	21	22
		F							11	12	13	14	15	1					í	'
		0																	í	
		·						Prior Year			Current Year's		Total	Book/				Bond Interest/	1	
		'																	í	NAIG
		е						Book/	Unrealized		Other Than	Total	Foreign	Adjusted	Foreign			Stock	1	NAIC
		i		Number				Adjusted	Valuation	Current Year's	Temporary	Change in	Exchange	Carrying Value	Exchange	Realized	Total	Dividends	í	Designation
CUSIP		g	Disposal Name of	of Shares		Par	Actual	Carrying	Increase/	(Amortization)/	Impairment	B./A.C.V.	Change in	at Disposal	Gain (Loss)	Gain (Loss)	Gain (Loss)	Received	Maturity	or Market
Identification	Description	n	Date Purchaser	of Stock	Consideration	Value	Cost	Value	(Decrease)	Accretion	Recognized	(11 + 12 - 13)	B./A.C.V.	Date	on Disposal	on Disposal	on Disposal	During Year	Date	Indicator (a)
Bonds - U	J.S. Governments																		1	
3128PES33 .	Fed Home Ln Mta		09/17/2007 Principal Receipt	l xxx	7,747	7.747.00	8,294	7,827		(80)		(80)		7 747				623	08/01/2016	1FE
31335HVE0 .	Federal Home Ln 90613		09/17/2007 Principal Receipt	XXX	6,197	6,604.00	6,012							6,197					01/01/2023	
	FHR 2497 NF		09/17/2007 Principal Receipt	XXX	3,229	3,229.00	13,770	3,301		(72)		(72)						235	01/15/2016	, 1FE
	FNMA 2003-3HD		09/25/2007 Principal Receipt	XXX	4,904	4,904.00	14,656	4,969		(65)		(65)		4,904					09/25/2016	
31393DGS4 . 31371MBN6 .	FNMA 2003-65KL		09/25/2007 Principal Receipt	XXX		22,615.00		22,806		1(190)		(190)		22,615					09/25/2013 05/01/2025	
	FNR 2003		08/27/2007 Various			4,077.00				(41)		(41)							08/25/2026	
0399999 Subtof	otal - Bonds - U.S. Governments			XXX	55,437	55,844.00	115,037	49,593		(166)		(166)		55,437				3,114	. XXX.	X X X .
Bonds - Ir	ndustrial and Miscellaneous	(Un	affiliated)																1	
	Amgen Inc	٠ .	08/23/2007 Warburg Dillon	.l xxx	57,877	65,000.00	64,411	64,411		92		92		64,503		(6,626)	(6,626)	87	02/01/2011	1 1FE
143658AV4	Carnival Corp		08/03/2007 Merrill Lynch	XXX	55,753	85,000.00	60,616	60,718						60,875		(5,122)	(5,122)	746		
	Century Tel İnc		07/24/2007 JP Morgan		66,364	55,000.00	58,644	58,644		(2,216)		(2,216)		56,428		` 9,936	9,936		08/01/2032	
	Cleveland Electric		07/02/2007 Maturity	X X X	200,000	200,000.00	208,163	202,429		(2,429)		(2,429)		200,000				14,260	07/01/2007	1FE
	EMC Corp		09/25/2007 Various	. XXX XXX	7,114	5,000.00				(28)		(28)		39.458		1,951			12/01/2011	1FE
	Liberty Media		07/16/2007 Various				173	173						171		(310)	(310)		01/15/2030	
	Teva Pharm		09/19/2007 Various		19,381	15,000.00				(427)		(427)		15,315		4.066	4,066		02/01/2024	
	ptal - Bonds - Industrial and Miscellaneous (Una	affiliated	(t)	x x x	445,800	465,171.00	452,390	446,758		(4,845)		(4,845)		441,913		3,887	3,887	18,735		X X X .
6099997 Subtof	otal - Bonds - Part 4			XXX	501,237	521,015.00	567,427	496,351		(5,011)		(5,011)		497,350		3,887	3,887	21,849	. XXX.	XXX.
6099998 Summ	nary Item for Bonds Bought and Sold This Quar	rter		XXX	XXX	XXX	XXX	XXX	XXX	XXX	X X X	X X X	XXX	XXX	XXX	XXX	XXX	XXX	. XXX.	X X X .
6099999 Subtot	stal - Bonds			XXX	501,237	521,015.00	567,427	496,351		(5,011)		(5,011)		497,350		3,887	3,887	21,849	. XXX.	X X X .
Preferred	Stock - Industrial and Misce	ellan	eous (Unaffiliated)																ł	
G16962204	Bunge Ltd		09/28/2007 Various	310.000	40,902		34.008			1		1		34.008		6.895	6.895		l. xxx.	P1L
	Centerpoint Energy		09/10/2007 Various	1,560.000			60,607	59,977	629			629		60,607		(5,772)	(5,772)			P1L
6399999 Subtof	otal - Preferred Stock - Industrial and Miscellane	eous (l	Jnaffiliated)	XXX	95,736	XXX	94,615	59,977	629			629		94,615		1,123	1,123	4,518	. XXX.	X X X .
6599997 Subtof	otal - Preferred Stock - Part 4			XXX	95,736	XXX	94,615	59,977	629			629		94,615		1,123	1,123	4,518	. XXX.	XXX.
6599998 Summ	nary Item for Preferred Stock Bought and Sold	This Q	uarter	XXX	XXX	XXX	XXX	XXX	XXX	XXX	X X X	XXX	XXX	XXX	XXX	XXX	XXX	XXX	. XXX.	X X X .
6599999 Subtot	otal - Preferred Stock			XXX	95,736	XXX	94,615	59,977	629			629		94,615		1,123	1,123	4,518	. XXX.	XXX.
7299998 Summ	nary Item for Common Stock Bought and Sold 1	This Qu	uarter	XXX	XXX	XXX	XXX	XXX	XXX	XXX	X X X	XXX	XXX	XXX	XXX	XXX	XXX	XXX	. XXX.	X X X .
7399999 Subtot	otal - Preferred and Common Stocks	. <u></u>		XXX	95,736	XXX	94,615	59,977	629			629		94,615		1,123	1,123	4,518	. XXX.	X X X .
7499999 Total -	- Bonds, Preferred and Common Stocks			XXX	596,973	XXX	662,042	556,328	629	(5,011)		(4,382)		591,965		5,010	5,010	26,367	. XXX.	X X X .

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

E06	Schedule DB Part A Section 1 NONE
E06	Schedule DB Part B Section 1
E07	Schedule DB Part C Section 1
E07	Schedule DB Part D Section 1

SCHEDULE E - PART 1 - CASH Month End Depository Balances

Month End Depository Balances									
1	2	3	4	5	Book Bala	nce at End of E	ach Month	9	
					Dur	ing Current Qua	arter		
			Amount	Amount of	6	7	8		
			of Interest	Interest					
			Received	Accrued					
			During	at Current					
		Rate of	Current	Statement	First	Second	Third		
Depository	Code	Interest	Quarter	Date	Month	Month	Month	*	
open depositories									
Northern Trust, New York, NY Money Market Account					75.676	75.676	294,844	xxx	
Lasalle Bank, Troy, MI Money Market Account						155,294	155,660	XXX	
Lasalle Bank, Troy, MI Concentration Account									
Lasalle Bank, Troy, MI Commercial Paper					399,820	415,166	430,504	XXX	
Lehman Borthers Inc, 190 S.									
La Salle St., Chicago, IL 60603 Commercial Paper					376 /16	302 301	336 032	x x x	
Northern Trust, New York, NY Money Market Account					9.982	9,982	11.900	$\begin{bmatrix} x & x & x \\ x & x & x \end{bmatrix}$	
0199998 Deposits in depositories that do not exceed the									
allowable limit in any one depository (See Instructions) - open depositories	XXX	X X X						XXX	
0199999 Totals - Open Depositories	XXX				29,129,921		32,853,930	XXX	
0299998 Deposits in0 depositories that do not exceed the									
allowable limit in any one depository (See Instructions) - suspended									
depositories	XXX							XXX	
0299999 Totals - Suspended Depositories	XXX	X X X						XXX	
0399999 Total Cash On Deposit	XXX				29,129,921	27,980,225	32,853,930	XXX	
0499999 Cash in Company's Office	XXX	X X X	. X X X .	X X X				XXX	
0599999 Total Cash	XXX	X X X			29,129,921	27,980,225	32,853,930	XXX	

E09	Schedule E Part 2 Cash EquivalentsNONE
Supp1	Medicare Part D Coverage Supplement NONE
ACT	Actuarial StatementNONE
AEP	Amended ExplanationNONE

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